

Formality Review Claims Count Sheet

Case No. _____

Date: ____/____/____

AS Filed			AS Filed			AS Filed			AS Filed			AS Filed		
No.	Ind.	Dep.	No.	Ind.	Dep.	No.	Ind.	Dep.	No.	Ind.	Dep.	No.	Ind.	Dep.
1	1		41		1	81			121			161		
2			42		1	82			122			162		
3			43		1	83			123			163		
4		3	44		1	84			124			164		
5		3	45		1	85			125			165		
6		3	46		3	86			126			166		
7		3	47		1	87			127			167		
8		3	48		1	88			128			168		
9		3	49		1	89			129			169		
10		3	50			90			130			170		
11		3	51			91			131			171		
12		3	52			92			132			172		
13		3	53			93			133			173		
14		3	54			94			134			174		
15		3	55			95			135			175		
16		3	56			96			136			176		
17		3	57			97			137			177		
18		3	58			98			138			178		
19		3	59			99			139			179		
20		3	60			100			140			180		
21		3	61			101			141			181		
22		3	62			102			142			182		
23		3	63			103			143			183		
24		3	64			104			144			184		
25		3	65			105			145			185		
26		3	66			106			146			186		
27		3	67			107			147			187		
28	1		68			108			148			188		
29		1	69			109			149			189		
30		1	70			110			150			190		
31		1	71			111			151			191		
32		1	72			112			152			192		
33		35	73			113			153			193		
34		5	74			114			154			194		
35		35	75			115			155			195		
36		35	76			116			156			196		
37		35	77			117			157			197		
38		35	78			118			158			198		
39		3	79			119			159			199		
40		1	80			120			160			200		
T. Ind.			T. Ind.	48	2	T. Ind.			T. Ind.			T. Ind.		
T. Dep.			T. Dep.	113	13	T. Dep.			T. Dep.			T. Dep.		
Total			Total	105		Total			Total			Total		

32x2=64
 749
 103
 12
 115